

your letter requesting OMB's analysis of the Republican budget resolution and its impact on the budget outlook.

On January 3, 2017, Republicans in the Senate Budget Committee introduced an FY 2017 budget resolution. Based on the numbers provided in the resolution, the Republican budget includes virtually no deficit reduction and would allow debt held by the public to increase by roughly \$9.5 trillion, from

\$14.2 trillion in 2016 to \$23.7 trillion in 2026. After a sustained period of historically fast deficit reduction under the President's leadership, the Republican budget would allow for a relatively steady increase in annual deficits, with the annual on-budget deficit increasing to over \$1 trillion by 2026.

Assuming that Republicans will not make cuts to off-budget programs like Social Security, unified annual deficits will be even

larger: growing to over \$1 trillion by 2022 and reaching more than \$1.3 trillion by 2026.

Comparisons of debt and deficit totals over time are best viewed as a share of the economy. Based on the Congressional Budget Office's most recent economic projections, it is clear that the Republican budget would fail the key fiscal test of stabilizing debt as a share of the economy.

REPUBLICAN BUDGET RESOLUTION AND CBO ESTIMATES OF THE PRESIDENT'S 2017 BUDGET

(On-Budget Deficits, Unified Budget Deficits, and Debt Held by the Public, Billions of Dollars)

	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026
On-Budget Deficits:										
Resolution	-\$583	-\$542	-\$674	-\$729	-\$785	-\$897	-\$893	-\$863	-\$946	-\$1,009
PB17	-447	-386	-500	-536	-566	-671	-665	-614	-669	-675
Unified Budget Deficits:										
Resolutions	-571	-548	-710	-798	-891	-1,043	-1,080	-1,094	-1,226	-1,341
PB17	-433	-383	-518	-585	-651	-791	-826	-813	-917	-972
Debt Held by the Public:										
Resolution	14,593	15,199	15,955	16,792	17,714	18,787	19,901	21,033	22,302	23,692
PB17	14,454	14,906	15,484	16,121	16,818	17,656	18,532	19,402	20,379	21,417
Difference										2,275

Sources: <http://www.budget.senate.gov/imo/media/doc/S.Con.Res.RepealResolution.pdf>, pp. 5-6; <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/reports/51383-APB.pdf>, Table 2; Resolution unified deficits derived using off-budget deficits from <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/reports/51384-marchbaseline.pdf>, table 1

Compared to the President's Budget, which drives down deficits as a share of the economy and maintains our fiscal progress through smart savings from health care, immigration, and tax reforms while making critical investments in economic growth and opportunity, the Republican Budget would lead to significantly larger deficits in each year and add more than \$2 trillion in debt over the next decade.

Notably, the budget resolution also contains exceptions to existing Congressional budget rules that seem targeted towards making it easier to pass legislation that would further increase deficits.

Sincerely,

SHAUN DONOVAN,
Director.

Mr. SCHUMER. Mr. President, many of my Republican colleagues like to claim they care about the deficit. During President Obama's administration, there was an obsession over deficit and debt reduction—and, by the way, no praise for the President for reducing the deficit by a dramatic amount. Now many of those same Members who chastised President Obama for much smaller deficits than proposed in their budget are supporting this budget resolution.

I wish to say to my colleagues, you can't claim to be a fiscal hawk and support a budget that piles on trillions in additional debt. That is not being fiscally conservative; it is being fiscally hypocritical in the extreme. So far, my friend Senator PAUL of Kentucky has made this point forcefully. My question is, Will other Republicans stand with him and stand up against this fiscal hypocrisy?

Mr. President, I yield the floor.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CONCURRENT RESOLUTION ON THE BUDGET, FISCAL YEAR 2017

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of S. Con. Res. 3, which the clerk will report.

The senior assistant legislative clerk read as follows:

A concurrent resolution (S. Con. Res. 3) setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026.

Pending:

Sanders amendment No. 19, relative to Social Security, Medicare, and Medicaid.

The ACTING PRESIDENT pro tempore. The Senator from South Dakota.

ORDER OF PROCEDURE

Mr. THUNE. Mr. President, I ask unanimous consent that the Senate recess from 1 p.m. to 2 p.m. for the weekly conference meetings and the time in recess count equally against S. Con. Res. 3; further, that Senator SANDERS or his designee control the time from 2 p.m. to 2:30 p.m.; and finally, that there be 2 minutes equally divided in the usual form prior to the vote on the Flake amendment.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. THUNE. Mr. President, clarifying that recent request, I ask unanimous consent that the Senate recess from 1 p.m. to 2 p.m. for the weekly conference meetings but that that time not count against S. Con. Res. 3.

The ACTING PRESIDENT pro tempore. Without objection, the modified request is agreed to.

Mr. THUNE. Mr. President, last week the Senate began consideration of the ObamaCare repeal resolution, which is the first step in the process of repealing the law. It is time for repeal.

Seven years ago, ObamaCare was sold to the American people with a lot of promises. The law was going to reduce premiums for families. It was going to fix problems with our health care system without hurting anyone who was happy with their health coverage. If you like your health plan, you will be able to keep it, people all across this country were told over and over again. If you like your doctor, you will be able to keep your doctor—also a promise and claim that was made over and

over again. As everyone knows, every one of these promises was broken. Premiums for families have continued to rise. Millions of Americans lost health care plans that they liked. Americans regularly discovered that they couldn't keep their doctors and that choice of replacement was often limited.

These broken promises were just the tip of the iceberg. The law hasn't just failed to live up to its promises, it is actively collapsing, and the status quo is unsustainable. Premiums on the exchanges are soaring. Deductibles regularly run into the thousands of dollars. For 2017, the average deductible for a bronze-level ObamaCare plan is rising from \$5,731 to \$6,092. With deductibles like that, it is no wonder that some Americans can't afford to actually use their ObamaCare insurance.

I receive a lot of mail from constituents in my State struggling to pay for their health care. One constituent contacted me to say: "My ObamaCare premium went up from \$1,080 per month to \$1,775 per month," a 64-percent increase, \$21,300 a year for health insurance. Let me just repeat that, a 64-percent increase in premiums, \$21,300 a year for health insurance. That is like paying another mortgage. That is a lot more than many people pay for their mortgage, and of course that is before any deductibles or other out-of-pocket costs are considered.

Another constituent wrote to tell me, "Today I received a new premium notice from my ObamaCare insurance. My policy rate for myself, my wife and my teenage son has increased by 357 percent."

The problems on the exchanges aren't limited to soaring costs, unfortunately. Insurers are pulling out of the exchanges right and left. Health care choices are rapidly dwindling. Narrow provider networks are the order of the day. One-third of American counties have just one choice of health insurer on their exchange.

This is not the health care reform the American people were looking for.

So it is no surprise that a recent Gallup poll found that 80 percent of Americans want major changes to ObamaCare or want the law entirely repealed and replaced or that 74 percent of American voters ranked health care as a very important voting issue for them in the 2016 elections. ObamaCare has not fixed our Nation's health care problems. It has made them worse. The American people deserve better.

Last week, the Senate started considering the ObamaCare repeal resolution, and we are continuing that process this week. This resolution will provide us with the tools we need to repeal the law, and then committees will get to work on the actual repeal bills. Then we will work step-by-step to replace ObamaCare with real health care reform that focuses on personalized, patient-centered care.

One massive problem with ObamaCare is the fact that it puts Washington in charge of health care decisions that should be made at a much lower level. The ObamaCare reform the Republicans pass will focus on fixing this. We are going to move control from Washington and give it back to States and the individuals. Health care issues don't have one size-fits-all solutions. It is time to stop acting like they do.

States should have the power to innovate and embrace health care solutions that work for the individuals and the employers of their States. Individuals should be able to make health care decisions in consultation with their doctors, not with Washington, DC. Another thing we are going to focus on is breaking down the ObamaCare barriers that have artificially restricted choice.

As I said earlier, ObamaCare has defaulted to a one-size-fits-all solution when it comes to health care, and that means that many Americans have found themselves paying for health care they don't need or want. We need much more flexibility in insurance plans. A thriving health care system would offer a wide variety of choices that would allow Americans to pick a plan tailored to their needs, that would be a competitive system that gives people in this country more choices, and inevitably what happens in those circumstances, that pushes the cost down.

We also need to give Americans the tools to better manage their health care and control costs. Of course, any reform plan has to make sure small businesses have the tools they need to provide the employees with affordable health coverage. ObamaCare has placed huge burdens on small businesses that have made it difficult for them to thrive and even to survive. It is time to lift these burdens and free up these businesses to grow and create jobs.

Our health care system wasn't perfect before ObamaCare. We all acknowledge that, but ObamaCare was not the answer. Instead of fixing the problems in our health care system, it

just made things worse. Republicans are ready to implement the kind of health care reform the American people are looking for: more affordable, more personal, more flexible health care coverage that meets their needs and is less bureaucratic.

The American people are ready for health care reform that actually works, and that is exactly what Republicans are going to give them starting right now.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. BARRASSO. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. BARRASSO. Mr. President, I would like to congratulate my colleague from South Dakota for his comments. I am hearing the same thing in Wyoming that he has been hearing about the ObamaCare health care law and the impact on people in his State. I am hearing the same thing. I heard it this past weekend in Wyoming talking to people about what impact ObamaCare has had on their lives.

It is very interesting because people all around the State of Wyoming are talking about the fact that their costs have gone up and choices have gone down. Many who had insurance that worked for them lost that insurance all related to a law passed in the House and the Senate and signed into law by President Obama.

Tonight, in Chicago, President Obama is going to give a farewell address. I am assuming he will talk about ObamaCare, and I am assuming he paints a very different picture than the American people have seen and are living with. The President is using scare tactics about what Republicans plan to do. No matter what President Obama wants, the American people have spoken. They have voted, and 8 out of 10 people say that what this costly and complicated health care law has done to them, they would like to see it either significantly changed or repealed and replaced. They know better than to believe what the Democrats are continuing to tell them because they have been living with it every day.

Seven years ago, Democrats made one false claim after another when they were trying to sell this law to the American people. Democrats said: If you like your doctor, you can keep your doctor. They said: If you liked your health care plan, you could keep your health care plan. That one was labeled the Lie of the Year a few years ago. They said premiums for the average family would go down by \$2,500. None of it was true. Now Democrats are out telling more tales about ObamaCare. All of these new stories are going to be just as false as the ones

they told us all in the past. For one thing, Democrats have been saying that millions of Americans are going to lose their health insurance if we repeal the ObamaCare health care law.

In a letter just last week, Senators SCHUMER and SANDERS said that Republicans are planning to take health care coverage away from more than 30 million Americans. It is not going to happen. The Democrats absolutely know it is not going to happen. It doesn't stop them from saying it.

The fact is, this should never have been about health insurance in the first place. As a doctor, I will tell you this should have been about health care and patients. Republicans are going to make sure that is where the focus is from now on. The number of people with good health insurance coverage under ObamaCare actually has been a lot less than what the Democrats are claiming. That is because lots of people who bought ObamaCare coverage only did it because the health care law forced them to give up the insurance they already had and liked and worked for them. I have heard many stories from people in Wyoming who had insurance. It worked for them. They chose it because it was best for them and their family, and they lost it because the President said it wasn't good enough for him. These are people who were hurt by the broken promises and by President Obama's well-earned award of Lie of the Year.

With the health care law, most of the people who got insurance for the first time were actually forced into the broken system called Medicaid. Most of those people were actually eligible for Medicaid before the law was even signed, but for people who didn't have insurance before, a lot of them still can't afford care now because they may have insurance, but the deductibles are so high they can't afford to use it. Half of ObamaCare enrollees say they are skipping doctor visits in order to save money. If a family's health insurance doesn't cover the care they need, then the number of people covered is totally meaningless.

Democrats are out there saying that if we try to replace ObamaCare with a better solution, that it is just going to, in their words, cause chaos in the health insurance industry. Where have they been? There is chaos everywhere because of ObamaCare. When you look at what Democrats did to America's health care system, what you see is chaos. Premiums are up 25 percent in 1 year. That is chaos. Deductibles are up by an average of \$450 in a year. That is chaos. There is no functioning marketplace for ObamaCare in one-third of the country. That is chaos. When Americans look at this, what they see is already chaos, and ObamaCare caused it.

I want to mention one of the false claims the Democrats are making, and it has to do with Medicaid. That is because Medicaid was broken long before ObamaCare. All the health care law did

was add more people onto this broken program. One reason Medicaid is struggling is the same reason the rest of ObamaCare isn't working—because Medicaid tries to impose too many rules and regulations from Washington. It tries to make one size fit all.

There are different needs in every State. States know what those needs are, and they know much better than Washington about the people who live in those States. There are Republican Governors like Mike Pence of Indiana who understood this very important fact—and I am glad he is soon going to be Vice President. Governors like Mike Pence fought for waivers, waivers to make sure they could do what the people of their States needed. Every Governor should have that kind of freedom to look out for the best interests of the people in their home States. They shouldn't have to ask permission from some unaccountable, unelected Washington bureaucrat before making improvements to their own Medicaid Program. Giving States the freedom to come up with better solutions is just one of the things Republicans are going to do to replace ObamaCare with real health care reform. States need and deserve to have that freedom, and people should be free to buy the health insurance that meets their needs, not what meets the needs of the President of the United States.

People shouldn't have to pay more for coverage that isn't a good value for them. That is why so many people aren't even signing up in the first place and would rather pay the penalty—a penalty that, in my mind, is still unconstitutional. Families should have more flexibility to save for their own medical care. That is a way to make sure they are not stuck with empty coverage they can't afford to use. People shouldn't be mandated to buy this overpriced, unusable insurance or face a penalty from the IRS. It is one of the most outrageous parts of the entire health care law. To me, it is the first thing that has to go on the chopping block.

Republicans are going to repeal damaging and destructive ideas like ObamaCare's many taxes, mandates, and penalties. Then we are going to walk through better solutions one-by-one, step-by-step. I hope some of the Democrats in Congress will join us.

The Democratic Senators must be heading home on weekends and listening to people who have been impacted the way I described the people of Wyoming believe they have been impacted by the health care law. They have to realize there are things we must do better and more freedoms that must be given to the American people.

The American people have suffered long enough with the chaos created by ObamaCare. It took years for health insurance markets to get this bad, and it is going to take time to get things fixed.

This resolution we have submitted to repeal ObamaCare is the start.

Mr. President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Wyoming.

Mr. ENZI. Mr. President, I thank my colleague from Wyoming, the doctor, the Senator who has been involved in health care all of his adult life and particularly since he got to the Senate. He has been looking at alternatives to what we have and will play an intricate part in any replacement that we do.

We know what the problems are, and we are in the land of denial right now with the Democrats making speeches about the fearmongering of what might be changed. This isn't the point at which it gets changed. This is the point at which it gets set up so that it can be changed, and I look forward to actually doing the repeal and the replacement under the guidance of Senator BAR-RASSO from Wyoming.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Michigan.

Ms. STABENOW. Mr. President, let me first say to the distinguished chairman of the Budget Committee that we look forward to seeing the replacement as well because that is really the key right now. People across the country are saying: Wait a minute. You are going to unravel a system. You are going to repeal and take away the health care that I have and the patient protections that I have, and we don't even know if it will be better.

Why in the world would that be done if the new system wasn't going to be better than the old system?

Right now we don't see anything. We see 6 years of repeals coming from the House and Senate and no plans. We still don't see a plan, and we have no idea. More importantly, there are millions of people with insurance who are either getting patient protections or affordable care they couldn't get before or have Medicare strengthened or Medicaid support, and no one knows what will happen next. Doctors, nurses, health care providers—no one knows what is going to happen next. I think it is the most irresponsible approach to addressing one of the basic needs for all of our families that we could ever have. So we know that in the end, when you pull the thread, essentially, you unravel the whole system. That, minimally, creates instability in the entire economy. There is no plan being held up that would improve health care, which we are all for. I am all for making the health care system more affordable for families, strengthening health care. Let's do it. Unravelling and creating chaos in the health care system—no. It makes absolutely no sense, and we know that it is just going to make America sick again.

I want to share a couple of stories. First, we hear from Mary of Dundee, who owns a small business and has a 20-year-old daughter with a preexisting condition. For her, coverage—but, also, what we call the Patients' Bill of Rights—is absolutely critical. That is part of the Affordable Care Act that af-

fects everybody with insurance. Seventy-five percent of Americans get their insurance through their employer. In the past, they could get dropped if they got sick, if they had diabetes or had a child with juvenile diabetes or had a heart condition or high blood pressure. Women who were of childbearing years could be viewed as having a preexisting condition. In the past, insurance companies had total control to decide who got coverage, when they got dropped, what would happen when you got sick and needed medical care. That changed with a Patients' Bill of Rights in the Affordable Care Act. There are a whole range of protections to make sure the insurance you pay for every month actually provides the medical care when you need it for you and your family.

Let's start with Mary's story. She wanted to express her concern about repealing the Affordable Care Act, and I appreciate very much the fact that she shared her story with me. She says:

My family and I have purchased our coverage through the [ACA] marketplace for 2015, 2016, and 2017. This opportunity has allowed us to become self-employed. . . .

They could open their own business. They weren't tied to their job because of the need of health insurance. They now have opened their own small business in Dundee, MI.

Prior to the ACA, I was working to provide coverage—

How many times have we heard that? I have heard that even in my own extended family—

then I lost my full time status and as a part-time employee, the hours I worked barely covered my portion of my employer provided healthcare.

By enrolling for coverage through the marketplace, I was able to pick the coverage needed for our family at an affordable price . . . not knowing what the future held becoming self employed. We have three daughters. Our oldest has life threatening allergies and asthma. I did not need to worry that we would be denied coverage due to preexisting conditions.

As Congress proceeds to dismantle the ACA, I am concerned for my oldest daughter who is in her sophomore year at the University of Michigan-Dearborn. She is 20 years old. . . . Will she continue to have coverage through our insurance until she is 26 as the ACA provides? If not, what kind of coverage will she be able to afford due to her pre-existing conditions? Why put more obstacles in the way of our young adults?

That is a really good question, Mary. It makes no sense to do that.

She goes on to say:

The ACA, we're sure, has faults . . . and like everything, could be improved, but to scrap it and not use it at least as a "seed" to grow and improve is beyond my understanding. To suggest that there is nothing to keep is absurd and 20-30 million Americans enrolled . . . agree with us.

I agree with you as well, Mary. Thank you for sharing your story.

The coverage in the Affordable Care Act and the strengthening of Medicare and Medicaid are critical, as are the patient protections—the Patient Bill of Rights that affects people who buy insurance now, who finally got control

back from insurance companies that made every single decision. Being able to know that, if, in fact, you get sick or your child has a serious health condition, they won't be denied care for the rest of their lives, and also being able to have them on your insurance as they start off in life—there are so many protections. The caps on treatments and the number of treatments and services provided have been eliminated. The Patients' Bill of Rights is absolutely critical.

I want to take just a moment to speak about another piece of this, which relates to the Patients' Bill of Rights as it relates to women. In the past, the majority of plans—about 70 percent of the insurance plans in the private sector that a woman might try to choose and purchase—wouldn't cover basic maternity care. I couldn't believe it when I first heard that. Wait a minute. It wouldn't cover basic maternity care? Now every plan has to cover basic maternity care. It makes sense. No longer is just being a woman a preexisting condition. That is part of the Patients' Bill of Rights.

The capacity to now get preventive care, a mammogram, cancer screenings, and other types of preventive care is done without a copay. So we want people to go and get that checkup and, if there is a problem, to be able to tackle it early. That is most important because it is better for the person, but it also means there will be less cost to the health care system if you can catch something early. So the Patients' Bill of Rights is really critical to that.

There is something else that is also in here that is appalling to me and goes directly to the question of women's health care, and that is the fact that this bill repeals Planned Parenthood services and, basically, guts health care for women across Michigan and women across the country. For 75 percent of the women who use a Planned Parenthood clinic in Michigan, their visit will be the only health care they get all year.

We have rural counties in northern Michigan where the only health care clinics doing preventive care—cancer screenings, basic services, OB/GYN visits—are the Planned Parenthood clinics. So many women across Michigan will see their access to health care denied if this passes and Planned Parenthood loses its funding. There were 71,000 patients, the majority of them women, in Michigan in 2014, who received care—breast exams, Pap smears, prenatal visits. Again, tying this all together, we want to cover maternity care, but we also want healthy moms and healthy babies, and that means prenatal care. We have communities in these small towns, as well as in the big cities. But it affects small towns and rural communities around Michigan, where women are going to be denied services, and it is the only clinic that is there.

I want to share a story from Laurie in Jonesville about the Affordable Care

Act and her particular situation. She said:

I have had type I diabetes for 54 years and when I needed to retire early at the age of 62 because of complications related to diabetes, I looked at the ACA for health insurance. . . . I couldn't afford COBRA.

I was able to buy health insurance at what I consider an affordable price with a small copay for my medications, the most expensive one being insulin at a retail price of \$296 a month. As you know, my preexisting conditions of type I diabetes, heart disease and a visual impairment, both complications of diabetes, would have been uninsurable without the ACA. I would have been uninsurable.

That is without the Patients' Bill of Rights, which says she has a right to be able to purchase health insurance.

In June of 2016 I was diagnosed with breast cancer, luckily diagnosed at Stage I in a routine mammogram. Without the ACA I wouldn't have been able to afford the mammogram or the subsequent treatment without depleting our life savings. I quickly reached my maximum out of pocket cost and while some people would complain about having to pay that, not me! My total bill so far is over \$150,000. . . .

That is for her cancer treatment.

There is the combination here of repealing Planned Parenthood funding for health clinics that allow someone like Laurie to go in and get a mammogram rather than waiting until she has a level of breast cancer that cannot be effectively treated or might otherwise cause loss of life. She was able to catch this early because she was able to get a screening—a mammogram—the kind of treatment that women in small towns all over Michigan have the capacity to do now because of the reasonable copays for care and partly because there is no copay for that mammogram but also because they have a clinic available in their community where they can get the care. All of this fits together—the access to preventive care for women, the health care clinics that are available around Michigan and around the country, and the Patients' Bill of Rights, which says you have a right to care. This is not just about the insurance company basing every decision on the fact that they want to make more money rather than cover you. You have a right to make sure that when you get sick, you don't get dropped, and, if you have breast cancer or diabetes, you have a right to have access to affordable health care.

So I would hope that our colleagues would join together, stop this craziness of trying to repeal health reform and protections for every single American, and, instead, sit down together and look at how we can make it better.

Our Republican colleagues will find willing partners in making the system more affordable and better, but we will continue to be the strongest possible opponents of ripping the system apart and creating chaos for American families.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Wyoming.

AMENDMENT NO. 52

Mr. ENZI. Mr. President, I call up amendment No. 52 and ask unanimous consent that it be reported by number.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The clerk will report the amendment by number.

The senior assistant legislative clerk read as follows:

The Senator from Wyoming [Mr. ENZI], for Mr. FLAKE, proposes an amendment numbered 52.

The amendment is as follows:

(Purpose: To strengthen Social Security and Medicare without raiding it to pay for new Government programs, like Obamacare, that have failed Americans by increasing premiums and reducing affordable health care options, to reform Medicaid without prioritizing able-bodied adults over the disabled, and to return regulation of insurance to State governments)

At the end of title III, add the following:

SEC. 3. DEFICIT-NEUTRAL RESERVE FUND RELATING TO PROTECTIONS FOR THE ELDERLY AND VULNERABLE.

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to protections for the elderly and vulnerable, which may include strengthening Social Security and Medicare, improving Medicaid, housing reform, and returning regulation of health insurance markets to the States, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

RECESS

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate stands in recess until 2 p.m.

Thereupon, the Senate, at 1:01 p.m., recessed until 2 p.m. and reassembled when called to order by the Presiding Officer (Mr. PORTMAN).

CONCURRENT RESOLUTION ON THE BUDGET, FISCAL YEAR 2017—Continued

The PRESIDING OFFICER. The Senator from Vermont.

Mr. SANDERS. Mr. President, as the ranking member of the Budget Committee, I want to take this opportunity to make several points in opposition to the Republican side-by-side amendment and in support of the amendment that I have offered.

Like many Republican proposals, if you read the Republican amendment, it sounds good on the surface, but if you probe half an inch into it, you recognize what an incredible disaster it will be for working families of this country—nice words, but devastating impacts. So I want to talk about that.

No. 2, I want to talk about what it will mean if, in fact, the Republicans